

# In the Supreme Court of the State of Alaska

**Rodney Mataafa,**

Petitioner,

v.

**State of Alaska,**

Respondent.

Supreme Court No. S-17782

## **Notice of Intent to Enter Judgment For Cost of Appointed Attorney**

Date of Notice: **7/29/2020**

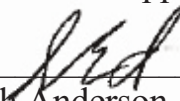
Trial Court Case No. **3AN-15-02969CR, 3AN-09-06798CR**

Unless you or the prosecutor objects by **9/14/2020** (you may use the enclosed form to file an objection), the court or clerk will enter a judgment against you for the cost of your appointed attorney as indicated below:

Type of Appellate Proceeding	Misdemeanor	Felony
Petition for Sentence Review	\$ 250	\$ 500
Petition for Review	500	1,000
<b>Petition for Hearing</b>	500	<b>1,000</b>
Original Application	500	1,000

Entered under Appellate Rule 209(b)(6).

Clerk of the Appellate Courts

  
\_\_\_\_\_  
Sarah Anderson, Deputy Clerk

cc: Rodney Mataafa c/o Spring Creek Correctional Center  
3600 Bette Cato  
Seward AK, 99664

Distribution:

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Cella, Rachel E.  
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# In the Supreme Court of the State of Alaska

**Rodney Mataafa,**

Petitioner,

v.

**State of Alaska,**

Respondent.

Supreme Court No. **S-17782**

## **Opposition to Entry of Judgment For Cost of Appointed Attorney**

Date of Notice: **7/29/2020**

Trial Court Case No. 3AN-15-02969CR, 3AN-09-06798CR

I oppose the entry of the proposed judgment against me for the cost of appointed attorney for the following reason(s):

- ☐ My conviction was reversed on appeal.
- ☐ I filed the following type of action, but the clerk or court assessed the wrong amount for this action:
  - ☐ Petition for Hearing
  - ☐ Petition for Review
  - ☐ Petition for Sentence Review
  - ☐ Original Application
- ☐ The clerk or court is proposing to enter more than one judgment against me. This is not correct because all of my offenses were resolved in one court proceeding.
- ☐ I should be assessed less than the scheduled amount because my attorney spent only \_\_\_\_ hours on my case. (If you check this box, you must attach a statement from your attorney showing the hours spent on your case.)
- ☐ Other \_\_\_\_\_

\_\_\_\_\_  
Appellant/Petitioner's Daytime Phone

\_\_\_\_\_  
Appellant/Petitioner's Signature

\_\_\_\_\_  
Appellant/Petitioner's Mailing Address      City      State      Zip

Mailed to State's Attorney on: \_\_\_\_\_ (Date)